

## MONTHLY REPORT FORM

4500

Name, Address City, County, ZIP :

American Energy Corporation  
43521 Mayhugh Hill Road TWP 88  
Beallsville OH 43716

Station Code :

013

Reported Date (Month Year) :

August 2006

Application :

OIL00091

9/20/2006

Sampling Station Description :

Final OutFall

|  |                 |           |
|--|-----------------|-----------|
| in(1) - Enter 1 for Continuous, 2 for Composite, 3 for Grab Sample | Reporting Lab : | Analyst : |
| in(2) - Enter frequency of sampling                                | ILA             | MANIAR    |

|       |                  |                  |                |                 |               |         |           |
|-------|------------------|------------------|----------------|-----------------|---------------|---------|-----------|
| (1)   | 3                | 3                | 3              | 3               | 3             | 3       | 3         |
| (2)   | 1                | 1                | 1              | 1               | 1             | 1       | 1         |
|       | (01045)          | (01055)          | (00515)        | (00530)         | (00045)       | (00400) | (50050)   |
|       | Iron, Total (Fe) | Manganese, Total | Residue, Total | Total Suspended | Total         | pH      | Flow Rate |
|       | ug/l             | (Mn)             | Dissolved      | Solids          | Precipitation | S.U.    | MGD       |
|       | ug/l             | ug/l             | mg/l           | mg/l            | Inches        |         |           |
| Day   |                  |                  |                |                 |               |         |           |
| 01    | AL               |                  |                |                 |               |         |           |
| 02    |                  |                  |                |                 |               |         |           |
| 03    |                  |                  |                |                 |               |         |           |
| 04    |                  |                  |                |                 |               |         |           |
| 05    |                  |                  |                |                 |               |         |           |
| 06    |                  |                  |                |                 |               |         |           |
| 07    |                  |                  |                |                 |               |         |           |
| 08    |                  |                  |                |                 |               |         |           |
| 09    |                  |                  |                |                 |               |         |           |
| 10    |                  |                  |                |                 |               |         |           |
| 11    |                  |                  |                |                 |               |         |           |
| 12    |                  |                  |                |                 |               |         |           |
| 13    |                  |                  |                |                 |               |         |           |
| 14    |                  |                  |                |                 |               |         |           |
| 15    |                  |                  |                |                 |               |         |           |
| 16    |                  |                  |                |                 |               |         |           |
| 17    |                  |                  |                |                 |               |         |           |
| 18    |                  |                  |                |                 |               |         |           |
| 19    |                  |                  |                |                 |               |         |           |
| 20    |                  |                  |                |                 |               |         |           |
| 21    |                  |                  |                |                 |               |         |           |
| 22    |                  |                  |                |                 |               |         |           |
| 23    |                  |                  |                |                 |               |         |           |
| 24    |                  |                  |                |                 |               |         |           |
| 25    |                  |                  |                |                 |               |         |           |
| 26    |                  |                  |                |                 |               |         |           |
| 27    |                  |                  |                |                 |               |         |           |
| 28    |                  |                  |                |                 |               |         |           |
| 29    |                  |                  |                |                 |               |         |           |
| 30    |                  |                  |                |                 |               |         |           |
| 31    |                  |                  |                |                 |               |         |           |
| TOTAL | 0                | 0                | 0              | 0               | 0             | 0       | 0         |
| AVG   | 0                |                  |                |                 |               | N/A     |           |
| MAX   | 0                |                  |                |                 |               |         |           |
| MIN   | 0                | 0                | 0              | 0               | 0             | 0       | 0         |

I certify under the penalty of law that I have personally examined and am familiar with the information submitted and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Date Report Completed:

09/20/2006

Signature of Reporter:

Title of Reporter: